

Fill in this information to identify the case:

United States Bankruptcy Court for the:

Eastern District of New York
(State)

Case number (if known): _____ Chapter _____

 Check if this is an amended filing**Official Form 201****Voluntary Petition for Non-Individuals Filing for Bankruptcy**

04/19

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	IYAR POST LLC		
2. All other names debtor used in the last 8 years			
Include any assumed names, trade names, and <i>doing business as</i> names			
3. Debtor's federal Employer Identification Number (EIN)	82 - 5336558		
4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business	
	2349 East 18th Street	Number Street	
	Number Street		
	Brooklyn	New York	11229
	City	State	ZIP Code
	Kings	P.O. Box	
	County	City State ZIP Code	
	Location of principal assets, if different from principal place of business		
	818 Post Avenue		
	Number Street		
	Staten Island, New York 10310		
	City	State	ZIP Code
5. Debtor's website (URL)			
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____		

Debtor

IYAR POST LLC

Name

Case number (if known) _____

7. Describe debtor's business**A. Check one:**

Health Care Business (as defined in 11 U.S.C. § 101(27A))
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
 Railroad (as defined in 11 U.S.C. § 101(44))
 Stockbroker (as defined in 11 U.S.C. § 101(53A))
 Commodity Broker (as defined in 11 U.S.C. § 101(6))
 Clearing Bank (as defined in 11 U.S.C. § 781(3))
 None of the above

B. Check all that apply:

Tax-exempt entity (as described in 26 U.S.C. § 501)
 Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
 Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.**8. Under which chapter of the Bankruptcy Code is the debtor filing?****Check one:**

Chapter 7
 Chapter 9

Check all that apply:

Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625 (amount subject to adjustment on 4/01/22 and every 3 years after that).
 The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
 A plan is being filed with this petition.
 Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
 The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
 The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

No

Yes. District _____ When _____ Case number _____
 MM / DD / YYYY

District _____ When _____ Case number _____
 MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

No

Yes. Debtor _____ Relationship _____
 District _____ When _____
 MM / DD / YYYY

Case number, if known _____

Debtor	IYAR POST LLC	
	Name _____	
	Case number (if known) _____	
11. Why is the case filed in this district? <i>Check all that apply:</i>		
<input checked="" type="checkbox"/> Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.		
<input type="checkbox"/> A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.		

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?	<input checked="" type="checkbox"/> No
	<input type="checkbox"/> Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.
	Why does the property need immediate attention? (Check all that apply.)
<input type="checkbox"/> It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety. What is the hazard? _____	
<input type="checkbox"/> It needs to be physically secured or protected from the weather.	
<input type="checkbox"/> It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).	
<input type="checkbox"/> Other _____	

Where is the property? _____	
Number	Street _____

City _____	State _____
ZIP Code _____	

Is the property insured?	
<input type="checkbox"/> No <input type="checkbox"/> Yes. Insurance agency _____	
Contact name _____	
Phone _____	

Statistical and administrative information

13. Debtor's estimation of available funds	<i>Check one:</i>		
<input type="checkbox"/> Funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.			
<hr/>			
14. Estimated number of creditors	<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
	<input type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000
	<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
	<input type="checkbox"/> 200-999		
<hr/>			
15. Estimated assets	<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
	<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
	<input checked="" type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
	<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

<p>Debtor</p> <hr/> <p>Name IYAR POST LLC</p>	<p>Case number (if known)</p> <hr/>												
<p>16. Estimated liabilities</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 33%;"><input type="checkbox"/> \$0-\$50,000</td> <td style="width: 33%;"><input type="checkbox"/> \$1,000,001-\$10 million</td> <td style="width: 33%;"><input type="checkbox"/> \$500,000,001-\$1 billion</td> </tr> <tr> <td><input type="checkbox"/> \$50,001-\$100,000</td> <td><input type="checkbox"/> \$10,000,001-\$50 million</td> <td><input type="checkbox"/> \$1,000,000,001-\$10 billion</td> </tr> <tr> <td><input type="checkbox"/> \$100,001-\$500,000</td> <td><input type="checkbox"/> \$50,000,001-\$100 million</td> <td><input type="checkbox"/> \$10,000,000,001-\$50 billion</td> </tr> <tr> <td><input checked="" type="checkbox"/> \$500,001-\$1 million</td> <td><input type="checkbox"/> \$100,000,001-\$500 million</td> <td><input type="checkbox"/> More than \$50 billion</td> </tr> </table> <hr/>		<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion	<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion	<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion	<input checked="" type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion
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Request for Relief, Declaration, and Signatures

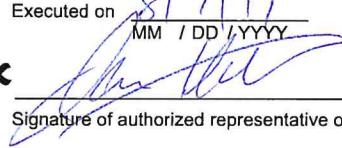
WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

- The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- I have been authorized to file this petition on behalf of the debtor.
- I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 8/7/19
MM / DD / YYYY



Signature of authorized representative of debtor

Jacob Hersbt

Printed name

Title Member

18. Signature of attorney



Signature of attorney for debtor

Date August 7, 2019

MM / DD / YYYY

Vivian Sobers, Esq.

Printed name

Sobers Law, PLLC

Firm name

11 Broadway, Suite 615

Number 11 Street

New York

NY 10004

City

State NY ZIP Code 10004

(917) 225-4501

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5074216

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Bar number

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